

County: Dane
 BELMONT NURSING & REHABILITATION CENTER
 110 BELMONT ROAD
 MADISON

Facility ID: 2280

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53714 Phone: (608) 249-7391
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 108
 Total Licensed Bed Capacity (12/31/01): 132
 Number of Residents on 12/31/01: 67

Ownership:
 Highest Level License:
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 108

Corporation
 Skilled
 No
 Yes
 Yes
 108

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		31.3
Supp. Home Care-Personal Care	No					1 - 4 Years		47.8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	17.9	More Than 4 Years		20.9
Day Services	No	Mental Illness (Org./Psy)	35.8	65 - 74	16.4			-----
Respite Care	No	Mental Illness (Other)	11.9	75 - 84	34.3			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	1.5	85 - 94	26.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	4.5	95 & Over	4.5	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.5		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	3.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	7.5	65 & Over	82.1	-----		
Transportation	No	Cerebrovascular	10.4		-----	RNs		3.0
Referral Service	No	Diabetes	3.0	Sex	%	LPNs		15.8
Other Services	No	Respiratory	7.5		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	13.4	Male	40.3	Aides, & Orderlies		
Mentally Ill	Yes		-----	Female	59.7			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	3	100.0	252	50	98.0	90	3	100.0	90	8	88.9	151	0	0.0	0	1	100.0	275	65	97.0
Intermediate	---	---	---	1	2.0	75	0	0.0	0	1	11.1	151	0	0.0	0	0	0.0	0	2	3.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	3	100.0		51	100.0		3	100.0		9	100.0		0	0.0		1	100.0		67	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	1.7	Daily Living (ADL)	Independent			
Private Home/With Home Health	2.6	Bathing	22.4	44.8	32.8	67
Other Nursing Homes	2.6	Dressing	22.4	46.3	31.3	67
Acute Care Hospitals	86.1	Transferring	35.8	32.8	31.3	67
Psych. Hosp. -MR/DD Facilities	0.9	Toilet Use	29.9	40.3	29.9	67
Rehabilitation Hospitals	0.0	Eating	79.1	3.0	17.9	67
Other Locations	6.1	*****				
Total Number of Admissions	115	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	10.4	Receiving Respiratory Care		3.0
Private Home/No Home Health	26.0	Occ/Freq. Incontinent of Bladder	50.7	Receiving Tracheostomy Care		1.5
Private Home/With Home Health	18.7	Occ/Freq. Incontinent of Bowel	31.3	Receiving Suctioning		1.5
Other Nursing Homes	6.0			Receiving Ostomy Care		1.5
Acute Care Hospitals	9.3	Mobility		Receiving Tube Feeding		1.5
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	3.0	Receiving Mechanically Altered Diets		38.8
Rehabilitation Hospitals	0.7					
Other Locations	11.3	Skin Care		Other Resident Characteristics		
Deaths	28.0	With Pressure Sores	1.5	Have Advance Directives		65.7
Total Number of Discharges		With Rashes	7.5	Medications		
(Including Deaths)	150			Receiving Psychoactive Drugs		49.3

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group Ratio %	Bed Size: 100-199 Peer Group Ratio %	Licensure: Skilled Peer Group Ratio %	All Facilities %
Occupancy Rate: Average Daily Census/Licensed Beds	81.8	82.7 0.99	83.8 0.98	84.3 0.97	84.6 0.97
Current Residents from In-County	85.1	82.1 1.04	84.9 1.00	82.7 1.03	77.0 1.11
Admissions from In-County, Still Residing	14.8	18.6 0.79	21.5 0.69	21.6 0.68	20.8 0.71
Admissions/Average Daily Census	106.5	178.7 0.60	155.8 0.68	137.9 0.77	128.9 0.83
Discharges/Average Daily Census	138.9	179.9 0.77	156.2 0.89	139.0 1.00	130.0 1.07
Discharges To Private Residence/Average Daily Census	62.0	76.7 0.81	61.3 1.01	55.2 1.12	52.8 1.18
Residents Receiving Skilled Care	97.0	93.6 1.04	93.3 1.04	91.8 1.06	85.3 1.14
Residents Aged 65 and Older	82.1	93.4 0.88	92.7 0.89	92.5 0.89	87.5 0.94
Title 19 (Medicaid) Funded Residents	76.1	63.4 1.20	64.8 1.17	64.3 1.18	68.7 1.11
Private Pay Funded Residents	13.4	23.0 0.58	23.3 0.58	25.6 0.53	22.0 0.61
Developmentally Disabled Residents	0.0	0.7 0.00	0.9 0.00	1.2 0.00	7.6 0.00
Mentally Ill Residents	47.8	30.1 1.59	37.7 1.27	37.4 1.28	33.8 1.41
General Medical Service Residents	13.4	23.3 0.58	21.3 0.63	21.2 0.63	19.4 0.69
Impaired ADL (Mean)	45.7	48.6 0.94	49.6 0.92	49.6 0.92	49.3 0.93
Psychological Problems	49.3	50.3 0.98	53.5 0.92	54.1 0.91	51.9 0.95
Nursing Care Required (Mean)	7.1	6.2 1.14	6.5 1.09	6.5 1.09	7.3 0.97